

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/088866

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st-AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		1				
3						
4						
5						
6		1				
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10		1				
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41						
42						
43						
44		1				
45						
46						
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.	12					
TOTAL CLAIMS	14					

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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